

(Rev. 4/97)

**FORM TO BE USED BY A PRISONER IN FILING A COMPLAINT
UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. §1983**

**UNITED STATES DISTRICT COURT
DISTRICT OF DELAWARE**

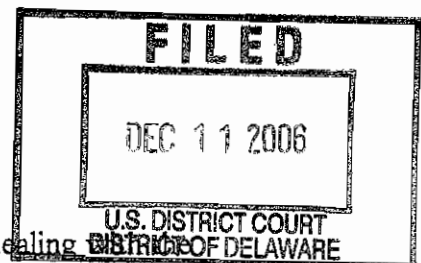
Moore, Kevin T.
(Enter above the full name of the plaintiff in this action)

V.

Long, Matthew

(Enter above the full name of the defendant(s) in this action)

- 06 - 757 -



I. Previous lawsuits

A. Have you begun other lawsuits in state or federal courts dealing with the same facts involved in this action or otherwise relating to your imprisonment? YES [] NO [✓] *BD scanned IFP*

B. If your answer to A is yes, describe the lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline).

1. Parties to this previous lawsuit

Plaintiffs _____

Defendants _____

2. Court (if federal court, name the district; if state court, name the county)

3. Docket number _____

4. Name of judge to whom case was assigned _____

5. Disposition (for example: Was the case dismissed? Was it appealed?
Is it still pending?)

6. Approximate date of filing lawsuit _____

7. Approximate date of disposition _____

II. A. Is there a prisoner grievance procedure in this institution? Yes [☒] No []

B. Did you present the facts relating to your complaint in the state prisoner
grievance procedure? Yes [☒] No []

C. If your answer is YES,

1. What steps did you take? I filed a grievance and I forwarded
an informal letter to the Warden

2. What was the result? haven't recieved any response up to
this date

D. If your answer is NO, explain why not _____

E. If there is no prison grievance procedure in the institution, did you complain to
prison authorities? Yes [] No []

F. If your answer is YES,

1. What steps did you take? _____

2. What was the result? _____

III. Parties

(In item A below, place your name in the first blank and place your present address in the second blank. Do the same for additional plaintiffs, if any.)

A. Name of Plaintiff Moore, Kevin T.
 Address Sussex County Correctional Center "SVOP" 23207 Dupont Blvd.
Georgetown, De. 19947

(In item B below, place the full name of the defendant in the first blank, his official position in the second blank, and his place of employment in the third blank. Use item C for the names, positions, and place of employment of any additional defendants.)

B. Defendant Long, Matthew is employed as Sgt.
at Sussex County Correctional Center "SVOP"

C. Additional Defendants C/O - David Wells ; C/O - Jacob Connor ; C/O - Dean Hudson
Cpl. - David Hamrick ; Cpl. - Soshua Connor ; Lt. - Dean Blades
all the above additional defendants are employed at
Sussex County Correctional Center "SVOP"
23207 Dupont Blvd. Georgetown, De. 19947

IV. Statement of Claim

(State here as briefly as possible the facts of your case. Describe how each defendant is involved. Include also the names of other persons involved, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Use as much space as you need. Attach extra sheet if necessary.)

while shackled to inmate Jeffery Cannon #164413 I was kicked
in my right ankle by Sgt. Matthew Long while standing outside
on the footprints, my ankle was re-injured by Sgt. Matthew
Long on the date of 11/23/06, the above additional defendants
witnessed the incident as well as all the names on the
back of the grievance form.

V. Relief

(State briefly exactly what you want the court to do for you. Make no legal arguments.
Cite no cases or statutes.)

I first would like for the Courts to issue a restraining order against Sgt. Matthew hong. I want Assault/Battery charges to be brought against Sgt. Matthew hong. I'd also like the Courts to award me compensatory, punitive and discretionary damages.

Signed this 07 day of December, 192006.

Kevin Moore
(Signature of Plaintiff)

I declare under penalty of perjury that the foregoing is true and correct.

12/07/06
Date

Kevin Moore
(Signature of Plaintiff)

FORM #584

GRIEVANCE FORM

FACILITY: SVOP DATE: 11/26/06
 GRIEVANT'S NAME: Kevin Moore SBI#: 202242
 CASE#: _____ TIME OF INCIDENT: 10:20 APPROX
 HOUSING UNIT: POD #8 Nurses Office

BRIEFLY STATE THE REASON FOR THIS GRIEVANCE. GIVE DATES AND NAMES OF OTHERS INVOLVED IN THE INCIDENT OR ANY WITNESSES.

On 11/23/06 I was kicked, as hard as possible, by Sgt. Long approx 9:20 p.m. After being kicked, I was taken to nurses offices. Mrs. L. Schafferman was the nurse on duty. She gave me little medical attention, do to my serious injury. I also ask the nurse to state certain information on my medical sheet, about my incident. As far as, being kicked by Sgt. Long. I ask Mrs. Schafferman to state this at least 3 times. Mrs. Schafferman, cares more about protecting the officers, then the health of the inmates. I have not yet, seen a doctor or nurse about my injury, despite putting in 3 sick call slips. I was given crutches, to lug for me. That can't be adjusted down.
 * I would like Mrs. Schafferman addressed about the situation. Also, replace by a nurse, who cares about people's health other than protecting officers who are totally wrong.

GRIEVANT'S SIGNATURE: Kevin Moore DATE: 11/26/06

WAS AN INFORMAL RESOLUTION ACCEPTED? _____ (YES) _____ (NO)

(COMPLETE ONLY IF RESOLVED PRIOR TO HEARING)

GRIEVANT'S SIGNATURE: _____ DATE: _____

IF UNRESOLVED, YOU ARE ENTITLED TO A HEARING BY THE RESIDENT GRIEVANCE COMMITTEE.

cc: INSTITUTION FILE
 GRIEVANT

(Grievance on Nurse)

FORM #584

GRIEVANCE FORM

FACILITY: S.V.O.P.DATE: 12/03/06GRIEVANT'S NAME: Kevin MooreSBI#: #202242

CASE#: _____

TIME OF INCIDENT: 11/23/06Approx 9:20p.m.HOUSING UNIT: POD #2

BRIEFLY STATE THE REASON FOR THIS GRIEVANCE. GIVE DATES AND NAMES OF OTHERS INVOLVED IN THE INCIDENT OR ANY WITNESSES.

11/23/06 I was kicked by Sgt. Matthews Long.
It is now 12/03/06 and have not yet been
seen by a doctor. My foot is swollen, its getting
very stiff, and I believe, I have pinched nerves.
The nurses on staff, gives me problem getting
medication. I was given Morphine, for only 5 days.
I keep putting in sick call slips, not getting any
results. I follow all rules and procedures. But still,
don't get anything accomplished. Being as thou, I got
kicked by a staff member. I don't get any proper attention or
medication. This is the second grievance, for the same situation.
 ACTION REQUESTED BY GRIEVANT: I would like to see Dr. A.S.A.P.
Also have medical staff reprimanded

GRIEVANT'S SIGNATURE: Kevin MooreDATE: 12/03/06

WAS AN INFORMAL RESOLUTION ACCEPTED? _____

(YES)

(NO)

(COMPLETE ONLY IF RESOLVED PRIOR TO HEARING)

GRIEVANT'S SIGNATURE: _____

DATE: _____

IF UNRESOLVED, YOU ARE ENTITLED TO A HEARING BY THE RESIDENT GRIEVANCE COMMITTEE.

cc: INSTITUTION FILE
GRIEVANT

FORM #584

GRIEVANCE FORM

FACILITY: SVOPDATE: 11/24/06GRIEVANT'S NAME: KEVIN MOORESBI#: 202242

CASE#: _____

TIME OF INCIDENT: APPROX - 9:20 p.m.HOUSING UNIT: POD 8

BRIEFLY STATE THE REASON FOR THIS GRIEVANCE. GIVE DATES AND NAMES OF OTHERS INVOLVED IN THE INCIDENT OR ANY WITNESSES.

On 11/23/06 approx 9:20 p.m. Pod 8 was sent to the foot print for allegedly talking on tier after 9:00 p.m. While everyone was getting shackled together. I informed the C/O's about my ankle injury. Which when they put the shackles on the opposite ankle, along with inmate Jeffrey Carmon. Once on the foot print, I had my right foot off of print "a little bit", to keep the weight off my ankle and balanced. Once Sgt. Long saw this, he kicked me, as hard as he could in my ankle. I told him that I had rods, screws, and plates in my ankle. He responded, that he doesn't care and if I say another word, he will spray me with mace. This was seen by ~~at~~ at least 25 inmates and 4 guards, along with a video tape.

ACTION REQUESTED BY GRIEVANT: After being kicked, by Sgt. Long, my screws and rods, shifted. Which caused my ankle & leg to swell all the way up. I asked for a doctor or nurse, and was helped by Richard Ingram and Corey Sanders to the nurses office. Where I received very little attention. I need outside medical attention and x-rays for shifted screws, rods, and plates.

GRIEVANT'S SIGNATURE: Kevin MooreDATE: 11/24/06

* Susant charges pressed on Sgt. Long for kicking me, and rest of staff for letting this treatment go on.

WAS AN INFORMAL RESOLUTION ACCEPTED? _____ (YES) _____ (NO)

(COMPLETE ONLY IF RESOLVED PRIOR TO HEARING)

GRIEVANT'S SIGNATURE: _____

DATE: _____

IF UNRESOLVED, YOU ARE ENTITLED TO A HEARING BY THE RESIDENT GRIEVANCE COMMITTEE.

cc: INSTITUTION FILE
GRIEVANT

On duty 11/23/06 Lt. Blade - Cpt Hambrick -
Cp. Connor - C/O Connor - C/O Wells

April '97 REV

* Sgt. Long *

Kevin Moore
SBI # 00202242



FIRST CLASS MAIL

Clerk -
U.S. District Court
J. Caleb Boggs Federal Bldg.
Lock Box 18
844 N. King St
Wilmington, DE 19801